

COMPLAINT REGISTRATION FORM

MINNESOTA BOARD OF ARCHITECTURE, ENGINEERING, LAND SURVEYING, LANDSCAPE ARCHITECTURE, GEOSCIENCE AND INTERIOR DESIGN

85 E. 7th Place, Suite 160
St. Paul, MN 55101-2113

You may use this form to file a complaint against an architect, engineer, land surveyor, landscape architect, geoscientist or interior designer. You may also use this form to file a complaint against an individual engaged in the unauthorized practice of a profession regulated by the Board. Your complaint may be disclosed to members, employees and consultants of the Board and to employees of the Minnesota Attorney General's Office. Under certain circumstances your complaint, or a summary of your complaint, may be disclosed to the person you are complaining against or to other persons who might have information about the matter. It also may be necessary to disclose your complaint and related investigative data to an administrative law judge. You are not legally required to complete or return this form. However, if you do not provide the information requested in this form, the Board may not be able to evaluate your complaint.

Complainant's Name (Your Name)

Name of individual complaint is against

Address

Address

City, State, Zip Code

City, State, Zip Code

Office Telephone

Office Telephone

Home Telephone

STATEMENT OF COMPLAINT

(Please type or print legibly. Use additional sheets if necessary.)

This statement is true and correct to the best of my knowledge.

Signature of Complainant

Date

AUTHORIZATION TO RELEASE COMPLAINT

Minnesota Board of Architecture, Engineering, Land Surveying,
Landscape Architecture, Geoscience and Interior Design
85 E. 7th Place, Suite 160
St. Paul, MN 55101
651-296-2388

I hereby authorize the Minnesota Board of Architecture, Engineering, Land Surveying, Landscape Architecture, Geoscience, and Interior Design to provide a copy of my *Statement of Complaint* (including my name), a summary of its contents, and any documentation I provide in support of my *Statement of Complaint*, at the Board's discretion, to _____ ("Respondent"), who is the subject of my complaint. I also hereby authorize the Board to release this information to a third party in the course of the Board's investigation of my complaint. **I understand that I am not legally required to sign this form.** The purpose of this authorization is to facilitate the investigation of my complaint. I am willing to appear as a witness at a hearing if the Board determines there is cause to warrant disciplinary action against the Respondent. This authorization expires one year after this date.

Signature of Complainant

Printed Name of Complainant

Date

I hereby decline to authorize the release of my *Statement of Complaint*, a summary of its contents, my name, and any documentation I provide in support of my *Statement of Complaint* to the Respondent. I understand that if I do not want my *Statement of Complaint*, a summary of its contents, my name, and any documentation I provide in support of my *Statement of Complaint* released to the person against whom my complaint is filed, or if I do not want to be called as a witness at a disciplinary hearing against Respondent, *then the Board may dismiss the complaint.*

Signature of Complainant

Printed Name of Complainant

Date